

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: DATA STORAGE CONTROLLER

Attorney Docket Number:: 16869P-010210US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Teruo  
Middle Name::  
Family Name:: Nagasawa  
Name Suffix::  
City of Residence:: Odawara  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address::  
City of Mailing Address:: Odawara  
State or Province of mailing address::  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Takahisa  
Middle Name::  
Family Name:: Kimura  
Name Suffix::  
City of Residence:: Odawara  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address::  
City of Mailing Address:: Odawara  
State or Province of mailing address::  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan

Status:: Full Capacity  
Given Name:: Takeshi  
Middle Name::  
Family Name:: Koide  
Name Suffix::  
City of Residence:: Odawara  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address::  
City of Mailing Address:: Odawara  
State or Province of mailing address::  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address::

#### **Correspondence Information**

Correspondence Customer Number:: 20350

#### **Representative Information**

Representative Customer Number:: 20350

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/616,829	07/14/00

#### **Foreign Priority Information**

Country::	Application number::	Filing Date::
Japan	11-356970	12/16/99

#### **Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::